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U.S. DISTRICT COURT, EDNC

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FORM TO BE USED BY A STATE PRISONER IN FILING A COMPLAINT UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. SECTION 1983 OR BY A FEDERAL PRISONER IN FILING A BIVENS CLAIM.

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF NORTH CAROLINA  
WESTERN DIVISION

NO. 5:04-ct-270-FL  
(leave this space blank)

THOMAS ANDREW MILLS JR.

(enter full names of each plaintiff(s))

v.

Inmate Number 23769-056

Federal Medical Center  
Bureau of Prisons  
LONNIE FAIRCLOTH  
ART BEELER

(enter full names of each defendant(s))

MARK CROGAN  
G. MOFFET

\*\*\*\*\*

- I. HAVE YOU BEGUN OTHER LAWSUITS IN FEDERAL COURT DEALING WITH THE SAME FACTS INVOLVED IN THIS ACTION? YES ( ) NO (X)

If your answer is YES, describe the former lawsuit in the space provided below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- II. DID YOU PRESENT THE FACTS RELATING TO YOUR COMPLAINT TO THE STATE INMATE GRIEVANCE PROCEDURE? YES (X) NO ( )

If your answer is YES:

1. What steps did you take? I filed several Administrative Remedies  
2. What was the result? (Attach copies of grievances or other supporting documentation.)

They were sent back Rejected, and Other

# VERIFIED STATEMENT

I have been advised of the requirements regarding exhaustion of administrative remedies and now submit this verified statement.

(Please choose the box that applies to your action):

       There are no grievance procedures at the correctional facility at which I am being confined.

This cause of action arose at Federal Medical Center, and I am now being housed at Federal Medical Center. Therefore, I do not believe I have administrative remedies relating to this complaint at this time.

✓ I have exhausted my administrative remedies relating to this complaint and have attached copies of grievances demonstrating completions.

## III. PARTIES:

In Item "A" below, place your name in the first blank and your present address in the second blank. Do the same for additional plaintiffs, if any. NOTE: ALL PLAINTIFFS LISTED IN THE CAPTION ON THE FIRST PAGE SHOULD BE LISTED IN THIS SECTION.

A. Name of Plaintiff: THOMAS ANDREW MILLS JR.  
 Name of Present Confinement Federal Medical Center  
 Address of Present Confinement P.O. Box 1600 Butner, NC 27509

In Item "B" below, place the full name of defendant in the first blank, his official position in the second blank, and his place of employment in the third blank. Use Item (C) through (F) for additional defendants. NOTE: ALL DEFENDANTS LISTED IN THE CAPTION ON THE FIRST PAGE SHOULD BE LISTED IN THIS SECTION.

B. Defendant Art Beeler  
 Position WARDEN  
 Employed at Federal Medical Center  
 Address P.O. Box 1600 Butner, NC 27509  
 Capacity in which being sued: Individual ( ) Official ( ) Both (✓)

C. Defendant Lonnice Faircloth  
 Position Officer  
 Employed at Federal Medical Center  
 Address P.O. Box 1600 Butner, NC 27509  
 Capacity in which being sued: Individual ( ) Official ( ) Both (✓)

D. Defendant Moffet  
 Position Officer  
 Employed at Federal Medical Center  
 Address P.O. Box 1600 Butner N.C 27509  
 Capacity in which being sued: Individual ( ) Official ( ) Both (☒)

E. Defendant Mark Grogan  
 Position Captain  
 Employed at Federal Medical Center  
 Address P.O. Box 1600 Butner N.C 27509  
 Capacity in which being sued: Individual ( ) Official (☒) Both ( )

F. Defendant \_\_\_\_\_  
 Position \_\_\_\_\_  
 Employed at \_\_\_\_\_  
 Address \_\_\_\_\_  
 Capacity in which being sued: Individual ( ) Official ( ) Both ( )

#### IV. STATEMENT OF CLAIM

State here as briefly as possible the FACTS of your case. Describe how each defendant is involved. Include also the names of the other persons involved, dates and places. DO NOT GIVE ANY LEGAL CITATIONS OR ANY LEGAL ARGUMENTS OR CITE ANY STATUTES. If you wish to allege a number of related claims, number and set forth each claim in a separate paragraph. Use as much space as you need. Attach extra sheets if necessary.

① I am in J-unit at FMC for discipline reasons and since October 2003, my medicines have sometimes not shown up. I have written so many complaints about this. They skip doses as well. I am on chemo for Stage III Melanoma and I have high BP and Heart disease. As I have expressed myself about this, it has caused me to receive several false incident reports along with verbal abuse from officers.

② Officer Lonnie Faircloth has thrown my food on the floor. he said "I spit in it" He has torn up mail for me and threw it away. He has slammed my arm in the trap

twice. He has told me to hang myself. He always beat on the door and made me feel unsafe and he made false reports. He refused to call and ask the nurse to bring medications. He claimed that's not his job, as a result I have fallen out on the floor from pain. He tore up a letter that I wrote to my Judge.

- ③ Officer Moffet refused to call for my medicines and as a result, I fell out in the floor. He has also threatened to beat my ass
  - ④ They cut the call buttons off so we are in trouble if we need them for an emergency
  - ⑤ Our medicine arrives as much as 2 to 3 hrs. late
  - ⑥ I notified the Warden and Captain and many lieutenants about this but it still continues
  - ⑦ I don't have access to law books and at one point it took 2 weeks to get a call to my attorney
  - ⑧ There is so much negligence because of not enough staff.
  - ⑨ I feel like I'm in a foreign country by their treatment
- Please help me before it cost me my life

#### V. RELIEF SOUGHT BY PRISONER

State briefly exactly what you want the Court to do for you. MAKE NO LEGAL ARGUMENTS. DO NOT CITE CASES OR STATUTES.

I would like the courts to impose a fine and recommend a better way of distributing medications. I also would like to be moved from this hostile situation as officers continue to abuse me daily. I have suffered mental anguish and I have nightmares from the threats

My arm feels like it has a bone chip.

Signed this 4<sup>th</sup> day of April, 2004.

Thomas A. Mills Jr.  
Signature of Plaintiff

\_\_\_\_\_  
Signature of other Plaintiffs  
(if necessary)

I declare under penalty of perjury that the foregoing is true and correct.

4-2-04  
Date

Thomas Andrew Mills Jr.  
Signature of Plaintiff

\_\_\_\_\_  
Signature of other Plaintiffs  
(if necessary)